Docket No.: Q95815

OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named mereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

HARDENABLE COMPOSITION							
			**				
the application of which ☐ is attached hereto	OR	☑ was filed on January as United States Application Number PCT/JP2005/0 (Confirmation No.	ation Number 01024_), and was am			
		(if applicable).					
I hereby state that I have reviewed amended by any amendment specifica		ontents of the above ide	ntified applica	ation, including	the claims, as		
I acknowledge the duty to disclose continuation-in-part application(s), m and the national or PCT international	naterial information wi	hich became available bet	ween the filin				
I hereby claim foreign priority under			which design	ated at least one	country other		
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discretion of Sughrue Mion, PLLC, and request that all correspondence about the application be addressed to the address filed WASHINGTON OFFICE

under the same USPTO Customer Number.

CUSTOMER NUMBER

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

B0400 20US 01 KN 89 XUS Docket No.: <u>Q95815</u>

NAME OF SOLE OR FIRST INVE	NTOR:							
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Inventor's Signature		Date						
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Mailing Address:								
City	State	Zip		Country				
NAME OF THIRD INVENTOR:								
Given Name (first and middle [if any])		Family Name or Surname						
Inventor's Signature			Date					
Residence: City	State	Country		Citizenship				
Mailing Address:								
City	State	Zip		Country				
NAME OF FOURTH INVENTOR:								
Given Name (first and middle [if any])	Family Name or Surname							
Inventor's Signature			Date	e				
Residence: City	State	Country		Citizenship				
Mailing Address:								
City	State	Zip		Country				
NAME OF FIFTH INVENTOR:								
Given Name (first and middle [if any])		Family Name or Surname						
Inventor's Signature		Date						
Residence: City	State	Country		Citizenship				
Mailing Address:								
City	State	Zip		Country				